

3-4-2
**NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)**

☐ Duplicate
(check, if applicable)

Assistant Commissioner for Patents
BOX PATENT APPLICATION
Washington, DC 20231

Attorney Docket No. 383-9U1
First Named Inventor: W. T. Gurnee
Express Mail Label No. EL665723066US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

HYPERBARIC OXYGEN THERAPY SYSTEM CONTROLS

which is:

an ☐ Original; or

a ☐ Continuation, ☐ Divisional, or ☐ Continuation-in-part (CIP)
of prior Application No. filed .

Anticipated Group/Art Unit: or Class , Subclass .

☒ This non-provisional patent application is based on Provisional Patent Application No.
60/272,416, filed February 28, 2001.

Enclosed are:

☒ Specification (including Abstract) and claims: 34 pages.

☐ Application Data Sheet.

☒ Newly executed Declaration (original).

☐ Copy of Declaration from prior application.

☐ Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).

☒ 16 sheets of drawings (formal).

☐ Transmittal Letter Accompanying Submission of Compact Disc in Accordance
with 37 C.F.R. §1.52(e), plus two identical compact discs (for computer program
Appendix)

☐ Nucleotide and/or Amino Acid Sequence Submission, including:

☐ Computer readable copy ☐ Paper Copy ☐ Verified Statement.

☒ Under PTO-1595 Cover Sheet, an assignment of the invention

☒ Name of Assignee: **Hyperbaric Technology, Inc.**

☐ Certified copy(ies) of Application No(s). filed is/are filed:
☐ herewith or ☐ in prior application .

☒ Applicants, by their undersigned attorney, claim Small Entity Status under 37
C.F.R. §1.27 as ☐ an Independent Inventor, or ☒ a Small Business Concern, or
☐ a Non-Profit Organization.

☐ Preliminary Amendment.

☒ Information Disclosure Statement, PTO/SB/08A, and cited references.

☐ Request for Nonpublication of Application Under 35 U.S.C. §122(b)

☐ Other:

jc658 U.S. PTO
02/28/02

10087042.022802

1000 U.S. PRO
10/087042
02/28/02

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$370			BASIC FEE: \$740	
Total	34 - 20 =	14	X9	\$ 126.00	OR	X18	\$
Independent	9 - 3 =	6	X42	\$ 252.00	OR	X84	\$
[] Multiple Dependent Claims Present			\$140	\$	OR	\$280	\$
			TOTAL	\$ 748.00	OR	TOTAL	\$

[] The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.

[X] A check in the amount of \$748.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 200383.0012)** as noted below. A duplicate copy of this sheet is enclosed.

[X] Any overpayments or deficiencies in the above-calculated fee.

[] Filing fee in the amount of \$ _____ as calculated above.

[X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.

[X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

February 28, 2002
(Date)

By:

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MGB/JDS:ccr
Enclosures